FORM D

116275

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

O E. 04 Estimated aver	_
SEC U	SE ONLY
Prefix	Serial
DATE R	ECEIVED

Name of Offering (check if this is a	an amendment and name has char	iged, and indicate cha	inge.)				_
Offering of Secured Convertible Pr stock issuable upon conversion of th						erlying shares of capit	al
Filing Under (Check box(es) that apply	y): 🔲 Rule 504	☐ Rule 505	⊠ Rule	506	☐ Section 4(6)	ULOE/JED	<u> </u>
Type of Filing:		New Filing			Amendment		10
	A. BA	SIC IDENTIFICAT	ION DATA			Level Ch	7
1. Enter the information requested a	bout the issuer				ξ.	1-97	,,,,,,,,
Name of Issuer (check if this is an	amendment and name has change	d, and indicate chang	ge.)			No. 17 1	
Vocent Solutions, Inc.							<u> 18</u>
Address of Executive Offices	•	Street, City, State, Zip	Code) Telepho	one Number (Including Area Co	$de) \qquad \langle C \rangle$	
2023 Stierlin Court, 2nd Floor, Mour	ntain View, CA 94043		(650) 9.	38-3663			
Address of Principal Business Operation (if different from Executive Offices)	ons (Number and Street, City, Sta	te, Zip Code)		•	Including Area Co	de) PROCESSET	7
Same as above.			(650) 9.	38-3663	U		<i>9</i>
Brief Description of Business Software development.			-		16	OCT 1 9 2004	
Type of Business Organization						THOMSON	
	☐ limited partnership, alrea	dy formed			other (please spe	THOMSON INANCIAI	
☐ business trust	☐ limited partnership, to be	formed					
Actual or Estimated Date of Incorpora	Ū	<u>Month</u> 06	Year 00		Actual	☐ Estimated	
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter U.S. CN for Canada; FN fo			E			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97) 1 of 7)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

24011 80	merar and managing partner of				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Las Bateman, Micl	t name first, if individual)				
		Street, City, State, Zip Code) urt, Mountain View, CA 9404	3		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Las Buffum, Chuck	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) ourt, Mountain View, CA 9404	3		
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Las Dougherty, Br	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) ourt, Mountain View, CA 9404	3		
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Las	t name first, if individual) H. DuBose				
	,	Street, City, State, Zip Code) 4-100, Menlo Park, CA 94025			
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Las Parsons, Geor	t name first, if individual) ge				
		Street, City, State, Zip Code) ourt, Mountain View, CA 9404	3		
Check Boxes that Apply:	Promoter	■ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Las Menlo Ventur	t name first, if individual) es IX, L.P.				
	sidence Address (Number and Road, 4-100, Menlo Park, (Street, City, State, Zip Code) CA 94025			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Moore, Georg					
	•	Street, City, State, Zip Code) ourt, Mountain View, CA 9404	43		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	➤ Director	General and/or Managing Partner
Full Name (Las Wang, Emil	t name first, if individual)				
	•	Street, City, State, Zip Code) ourt, Mountain View, CA 940-	43		
Jo vocent Sui	accoust men 2023 Suci illi Co	, mountain fier, CA 940			

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 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	E Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
	name first, if individual)				
King, Jeff Business or Resi	dence Address (Number and	Street, City, State, Zip Code)			
1140 Castro #4	1, Mountain View, CA 940				
Check Box(es)-that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last Gould, Craig	name first, if individual)				
	idence Address (Number and I, Menlo Park, CA 94025	Street, City, State, Zip Code)			·
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	name first, if individual)			·	
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	d Street, City, State, Zip Code)			

1.	Has the iss	uer sold, or de	oes the issue	r intend to s				-	under ULOE			Yes No	o_ <u>√</u>
2.	What is the	e minimum in	vestment tha	at will be ac	cepted fron	n any individ	lual?					\$ <u>N/A</u>	
3.	Does the o	ffering permit	t joint owner	ship of a sir	ngle unit?		•••••••••••••••••••••••••••••••••••••••					Yes <u>√</u> No	<u> </u>
4.	solicitation registered	of purchase	rs in connec and/or with	ction with s a state or st	ales of sec ates, list th	urities in the e name of the	e offering. e broker or	If a person dealer. If mo	to be listed i	s an associate	d person or	agent of a b	muneration for proker or dealer ersons of such a
Full	Name (Las	t name first, i	f individual)										
Bus	iness or Res	idence Addre	ss (Number	and Street, (City, State,	Zip Code)					·		
Nan	ne of Assoc	ated Broker o	or Dealer										
Stat	es in Which	Person Listed	d Has Solicit	ted or Intend	ls to Solicit	Purchasers							
(Ch	eck "All Sta	tes" or check	individual S	states)			••••••	••••••					All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Las	t name first, i	f individual)										
Bus	iness or Res	idence Addre	ss (Number	and Street,	City, State,	Zip Code)	·						
Nan	ne of Assoc	iated Broker o	or Dealer										
Stat	es in Which	Person Liste	d Has Solicit	ted or Intend	ls to Solicit	Purchasers	····						
(Ch	eck "All Sta	ites" or check	individual S	States)									All States
[AL	.]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	Γ]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Las	t name first, i	f individual)	1									
Bus	iness or Res	sidence Addre	ess (Number	and Street,	City, State,	Zip Code)							*****
Nar	ne of Assoc	iated Broker o	or Dealer						16 - 2 - 4 - 17 - 17 - 17 - 17 - 17 - 17 - 17				
Stat	es in Which	Person Liste	d Has Solicit	ted or Intend	ds to Solici	Purchasers							
(Ch	eck "All Sta	ites" or check	individual S	States)		•••••	•••••••						All States
[AL	.]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

B. INFORMATION ABOUT OFFERING

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\Pi \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Sold Offering Price Equity Common Preferred Convertible Securities (including warrants)..... 1,000,000.00 \$ 1,000,000.00 Partnership Interests Other (Specify _____) Total..... 1,000,000.00 1,000,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases 1,000,000.00 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505..... Regulation A..... Rule 504..... Total..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the

securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not

Transfer Agent's Fees

Printing and Engraving Costs

Legal Fees

Sales Commissions (specify finders' fees separately)

Other Expenses (Identify)

Total

known, furnish an estimate and check the box to the left of the estimate.

X.

0

0

25,000:00

25,000.00

· ` C. OFFERING PRICE, NUMBER OF IN	IVESTORS, EXPENSES AND	USE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the "adjusted" 			\$ 975,000.00
 Indicate below the amount of the adjusted gross proceeds to the issuer us If the amount for any purpose is not known, furnish an estimate and cl payments listed must equal the adjusted gross proceeds to the issuer set for 	heck the box to the left of the e	estimate. The total of the	
		Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees		□ \$o	□ \$ <u>o</u>
Purchase of real estate		□ so	
Purchase, rental or leasing and installation of machinery and equipment		□ so	□ \$ <u>0</u>
Construction or leasing of plant buildings and facilities		□ \$ 0	□ \$ <u>0</u>
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger).		□ \$o	□ s <u>o</u>
Repayment of indebtedness		□ s <u>o</u>	□ \$ <u>0</u>
Working capital		□ \$ <u>o</u>	≥ \$ 975,000.00
Other (specify):	P (□ \$ o	□ so
		□ \$o	· · · · · · · · · · · · · · · · · · ·
Column Totals		□ s o	≥ \$ 975,000.00
Total Payments Listed (column totals added)		≥ \$ <u>975,000</u>	0.00
D. FEDI	ERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Co	uthorized person. If this notice i		
The issuer had duly caused this notice to be signed by the undersigned duly at	uthorized person. If this notice in the properties of the properti		
The issuer had duly caused this notice to be signed by the undersigned duly at an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.	uthorized person. If this notice i commission, upon written request Signature	of its staff, the information	Date
The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vocent Solutions, Inc.	uthorized person. If this notice is commission, upon written request Signature	of its staff, the information	1 furnished by the issuer to any
The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vocent Solutions, Inc. Name of Signer (Print or Type)	ethorized person. If this notice is commission, upon written request Signature Manual Title of Signer (Print or Type)	of its staff, the information	Date
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The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vocent Solutions, Inc. Name of Signer (Print or Type) Frank F. Rahmani	Signature Title of Signer (Print or Type) Assistant Secretary	of its staff, the information	Date
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ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)